

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Roberto Baruchello et al.

Application No.: 10/530,350

Confirmation No.: 7761

Filed: April 6, 2005

Art Unit: 2859

For: TOUCH PROBE COMPRISING A SWITCH  
WITH CONTACTS PROTECTED BY INERT  
GAS

Examiner: Yaritza Guadalupe

**COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

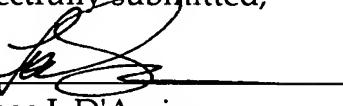
Dear Sir:

Applicants have reviewed the Examiner's Statement of Reasons for Allowance and wish to submit the following remarks. The Statement paraphrases several limitations from independent claim 1 as reasons for allowance of claims 1-11. Applicants wish to point out that independent claim 1 contains other limitations which, in combination with the limitations paraphrased in the Statement, render claim 1 allowable. Moreover, dependent claims 2-11 recite limitations which, in combination with their base claim, render the dependent claims allowable.

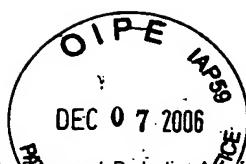
Otherwise, Applicants agree with the Statement that the allowed claims distinguish over the prior art.

Dated: December 7, 2006

Respectfully submitted,

By   
Thomas J. D'Amico

Registration No.: 28,371  
DICKSTEIN SHAPIRO LLP  
2101 L Street NW  
Washington, DC 20037-1526  
(202) 785-9700  
Attorney for Applicant



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  
**Fee Transmittal**  
**For FY 2006**

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 1,700.00)

**Complete if Known**

Application Number	10/530,350-Conf. #7761
Filing Date	April 6, 2005
First Named Inventor	Roberto Baruchello
Examiner Name	Y. Guadalupe
Art Unit	2859
Attorney Docket No.	M1885.0052/P052

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
	<b>Fee (\$)</b>	<b>Small Entity</b> <b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity</b> <b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity</b> <b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

**Fee Description**

Each claim over 20 (including Reissues)

<b>Small Entity</b>	
<b>Fee (\$)</b>	<b>Fee (\$)</b>
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
11	- 20 =	x	=	

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
1	- 3 =	x	=

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1501 Utility issue fee	1,400.00
1504 Publication fee for early, voluntary, or normal ...	300.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	28,371	Telephone	(202) 420-2232
Name (Print/Type)	Thomas J. D'Amico		Date	December 7, 2006	